



# Community Reinforcement and Family Training

CRAFT



NIAAA

Funded in part by a grant from the  
National Institute on Alcohol Abuse  
and Alcoholism

# A Community Reinforcement Approach

CRA



The background of the slide is a light-colored marbled paper with a complex, swirling pattern of grey, beige, and cream tones. A thin white rectangular border is centered on the slide, enclosing the title text. On the left side of this border, there is a short vertical white line.

# Unilateral Family Therapy

Concerned Significant Others

CSOs



Identified Patients

IPs



# Sisson & Azrin (1986)

- 6 of 7 (86%) IPs engaged in CRA condition
- Average of 7 CSO sessions (58 days)
- IP use reduced by half at engagement point
- None of 5 IPs engaged in traditional group
- Both treatments done by behavior therapists

# Characteristics of CSOs

|                    |    |
|--------------------|----|
| Mean age           | 47 |
| Years of education | 14 |
| Females (%)        | 91 |
| Anglos (%)         | 52 |
| Hispanic (%)       | 39 |
| Prior Al-Anon (%)  | 58 |



# CSO Relationship to Drinker

|                         |    |
|-------------------------|----|
| ■ Years of Relationship | 22 |
| ■ Spouse (%)            | 58 |
| ■ Parent (%)            | 30 |
| ■ Other (%)             | 12 |

130 CSOs randomly assigned to one of three interventions

- Al-Anon Facilitation Therapy (AFT)
- Johnson Institute Intervention (JII)
- Community Reinforcement (CRAFT)

# Nested or Crossed Therapists?

When both treatments (behavioral and traditional) are offered by the same behavior therapists, the behavioral approach is superior

Azrin, Sisson, Meyers & Godley, 1982

Sisson & Azrin, 1986



# Nested or Crossed Therapists?

When behavioral and traditional (12 step) treatments are each offered by therapists committed to their approach, outcomes are similar

Project MATCH

Albuquerque CRA study

# Urn Randomization

Random assignment to groups, while balancing on selected case characteristics, to decrease the likelihood of pretreatment differences



# Al-Anon Facilitation Therapy

- 12 sessions of 1 hour each
- Designed to engage the CSO in Al-Anon
- Acceptance of powerlessness
- Emphasis on detachment and self-care
- Supervisor: Joseph Nowinski, Ph.D.



# Johnson Institute Intervention

- 6 sessions of 2 hours each
- 4 sessions of preparation and training
- 1 family confrontation meeting
- 1 post-intervention evaluation
- Supervisor: A. Lane Leckman, M.D.

# CRAFT

- 12 sessions of 1 hour each
- Empowerment to influence change
- Training in behavior change skills
- Improvement of CSO life quality
- Preparation for treatment engagement
- Supervisor: Robert J. Meyers, M.S.



# Specific CRAFT Components

- Motivational readiness (costs/benefits)
- Preventing dangerous situations
- Contingency management training
- Social skill training
- Strategies to interfere with use
- Planning competing activities
- Increased positive reinforcement for CSO
- Preparing to initiate treatment



# CSO Follow-up Rates (Percent)

|          | AFI | JII | CRA |
|----------|-----|-----|-----|
| Month 3  | 98  | 98  | 100 |
| Month 6  | 98  | 98  | 100 |
| Month 9  | 93  | 95  | 100 |
| Month 12 | 93  | 90  | 98  |
| All Four | 93  | 90  | 98  |

# Services During First 90 Days After Recruitment

|                        | AFI  | JII | CRA  | p<   |
|------------------------|------|-----|------|------|
| Prescribed sessions    | 12   | 6   | 12   |      |
| Prescribed hours       | 12   | 12  | 12   |      |
| Mean sessions attended | 11.4 | 3.2 | 10.7 |      |
| % Sessions attended    | 95   | 53  | 89   | .001 |
| % Attending Al-Anon    | 75   | 18  | 18   | .05  |
| Other Therapy Sessions | 4.8  | 2.0 | 2.6  | .001 |



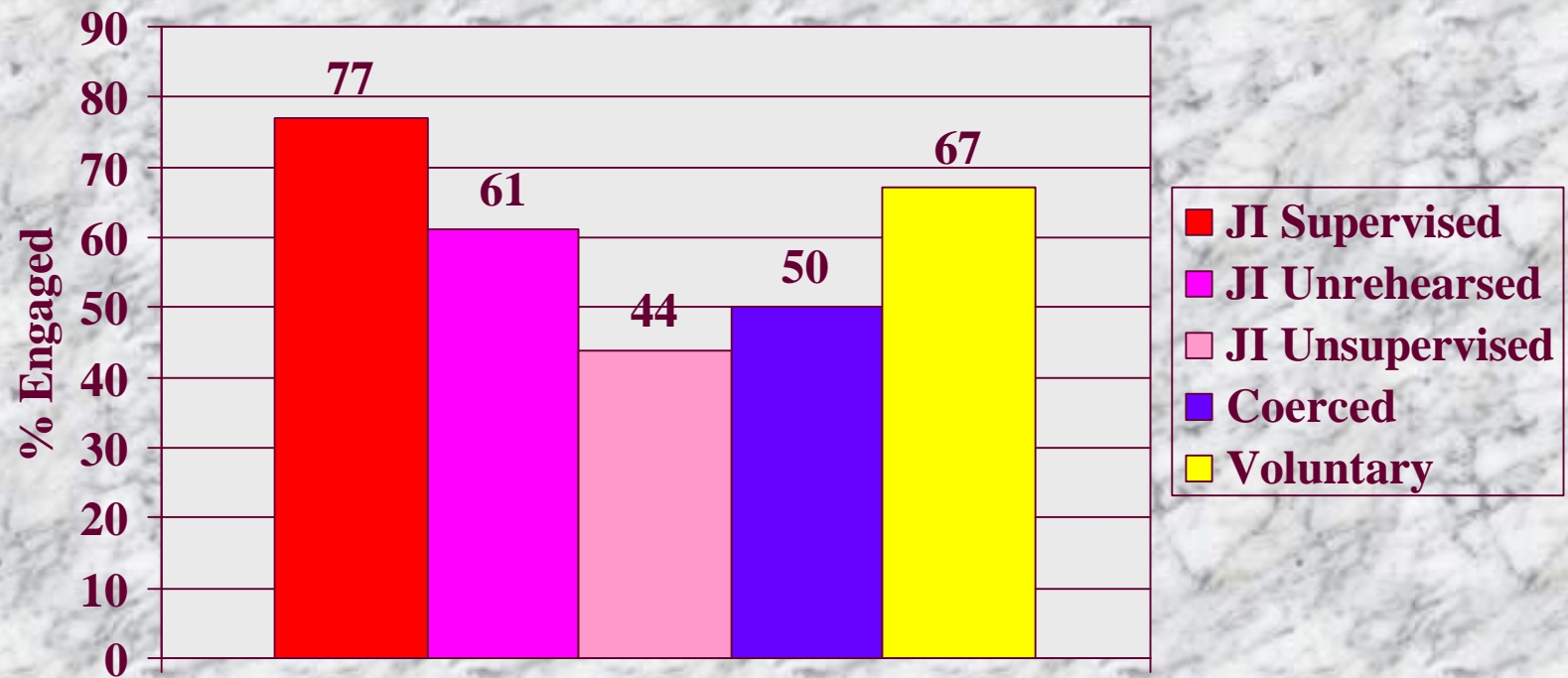
# Liepman et al (1989)

- 24 families given Johnson training
- Only 7 (29%) completed an intervention
- 6 of these 7 alcoholics entered treatment (86% of interventions, 25% of sample)
- 3 of 17 (17%) entered treatment without an intervention
- Intervention cases had longer abstinence (11 versus 3 months on average)



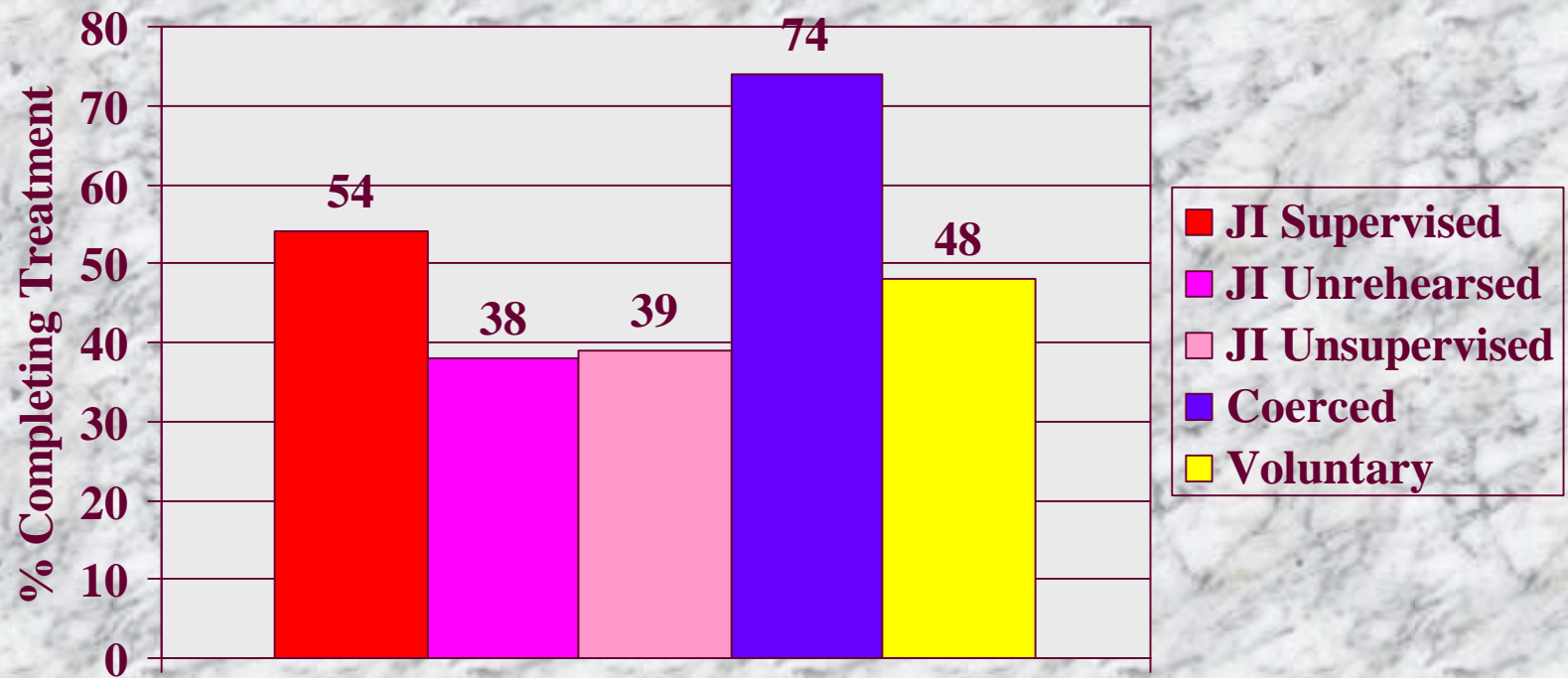
# Engagement Rates by Referral Type

(nonrandom assignment, intent to treat)



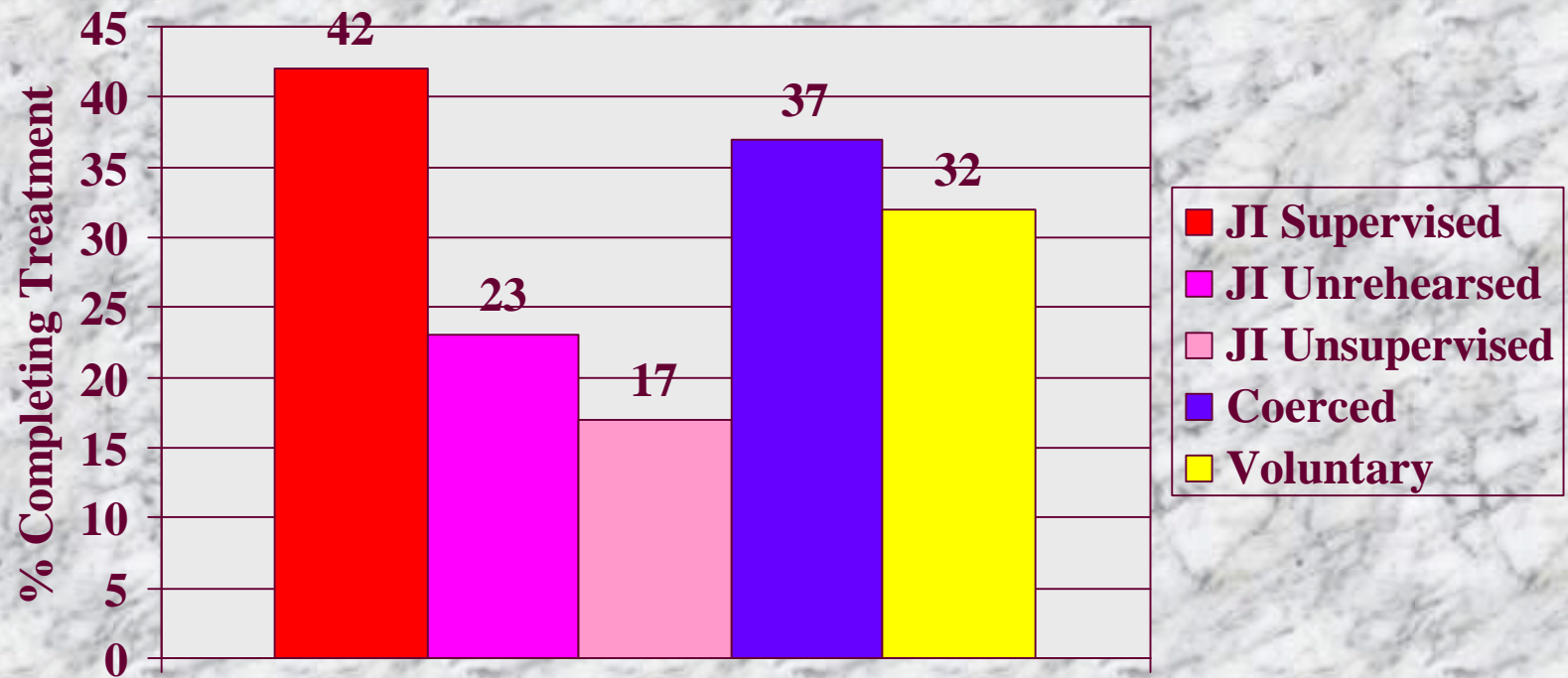
Loneck et al., 1996 (all cases)

# Treatment Completion Rates by Referral Type (nonrandom Assignment)



Loneck et al., 1996 (treated cases)

# Treatment Completion Rates by Referral Type (nonrandom assignment)

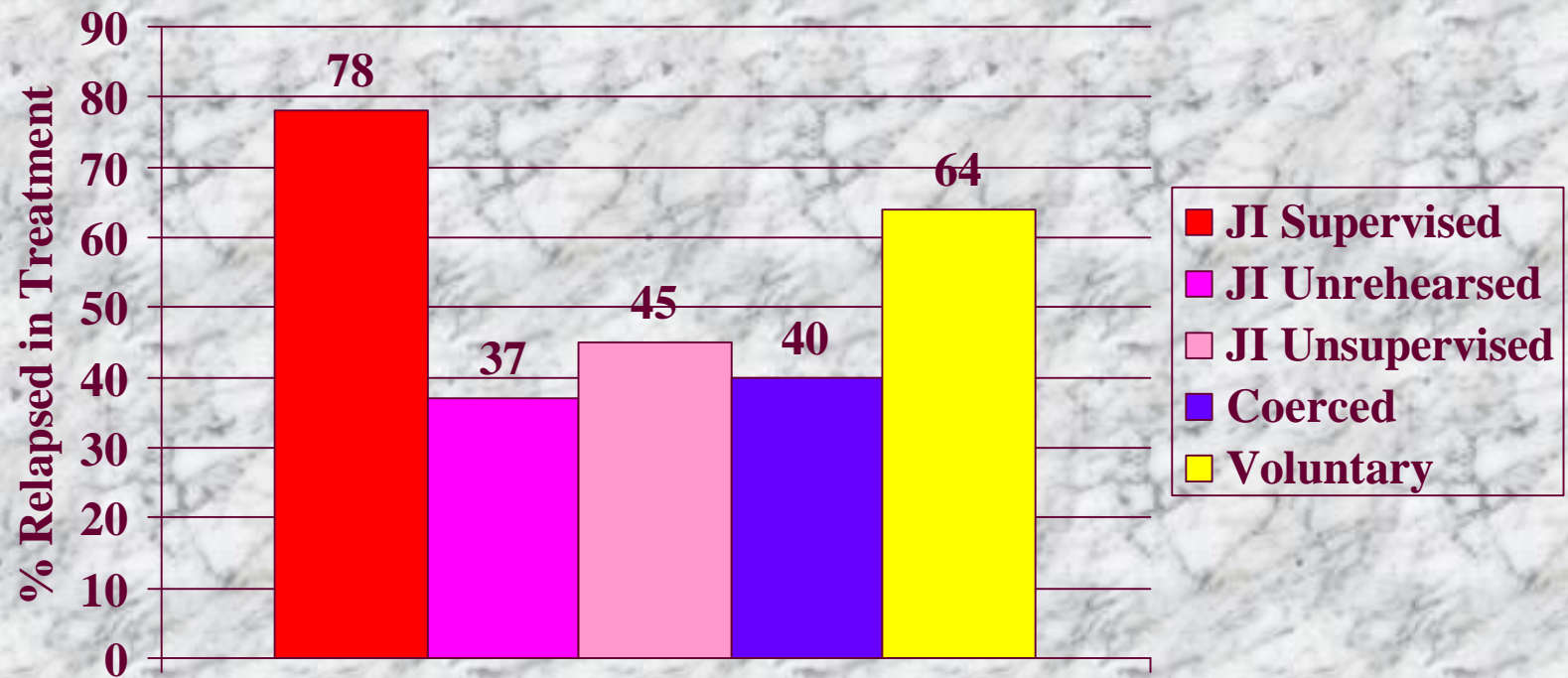


Loneck et al., 1996 (all cases)



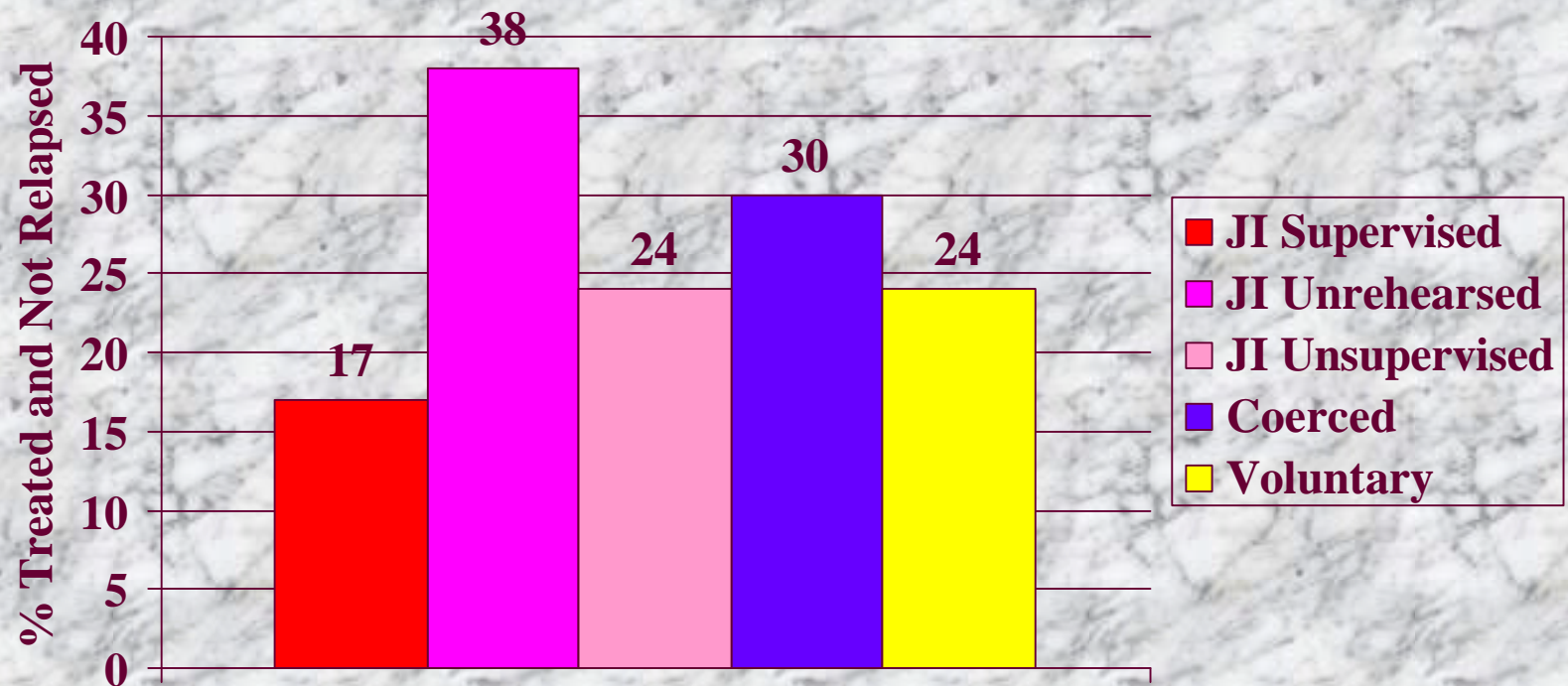
# Relapse Rates by Referral Type

(nonrandom assignment)



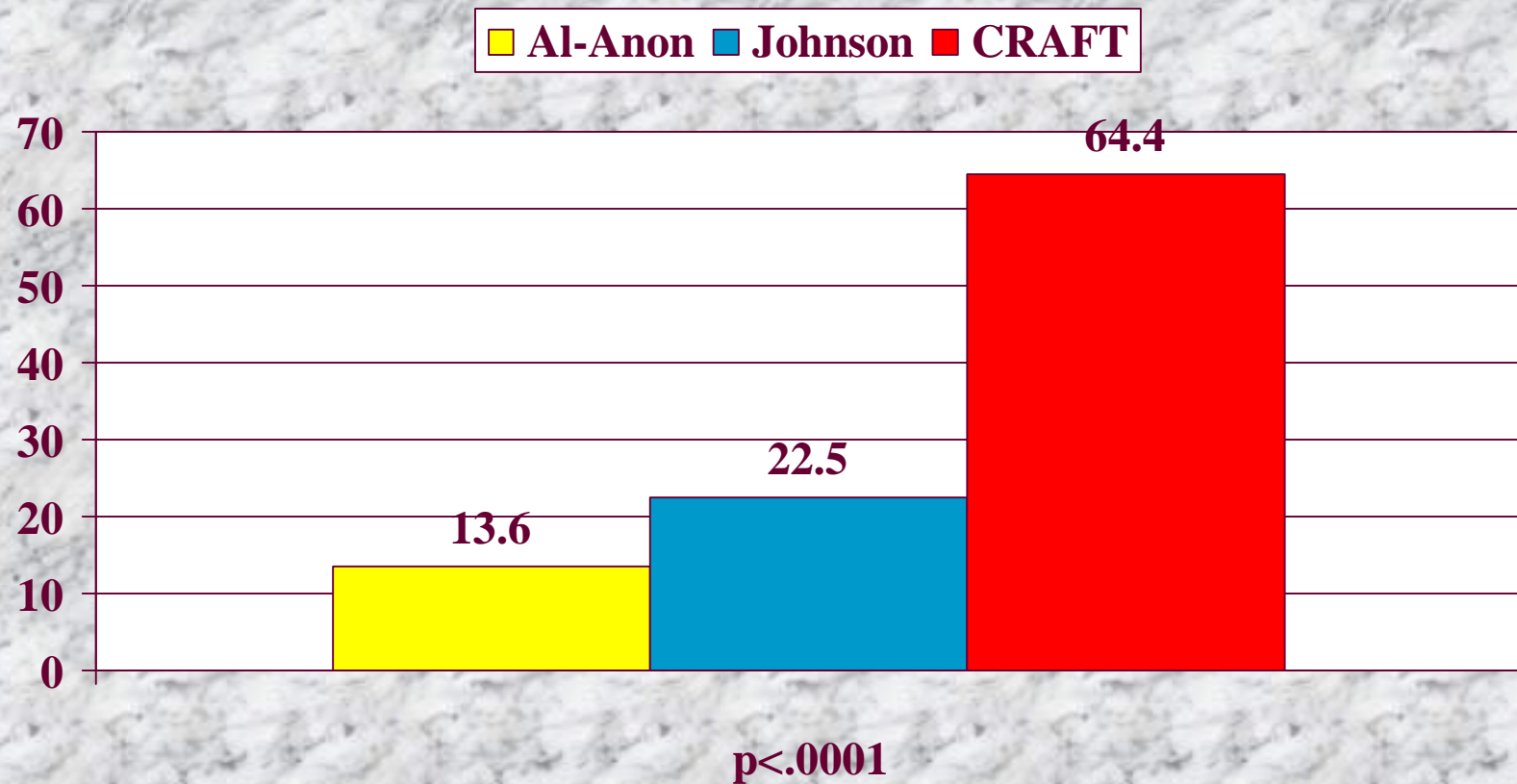
Loneck et al., 1996 (treated cases)

# “Success” Rates by Referral Type (nonrandom assignment)



Loneck et al., 1996 (all cases)

# Treatment Engagement Rates





# Time to Engagement

From the date of the CSO's first session  
of those IPs who entered treatment (first  
session) during the 12 months of the study

50% started treatment within 47 days

81% started treatment within 90 days

# Engagement Success Rates

Across treatment conditions:

|         |     |
|---------|-----|
| Parents | 49% |
| Spouses | 29% |
| Others  | 20% |

# Overall Improvement of CSOs on

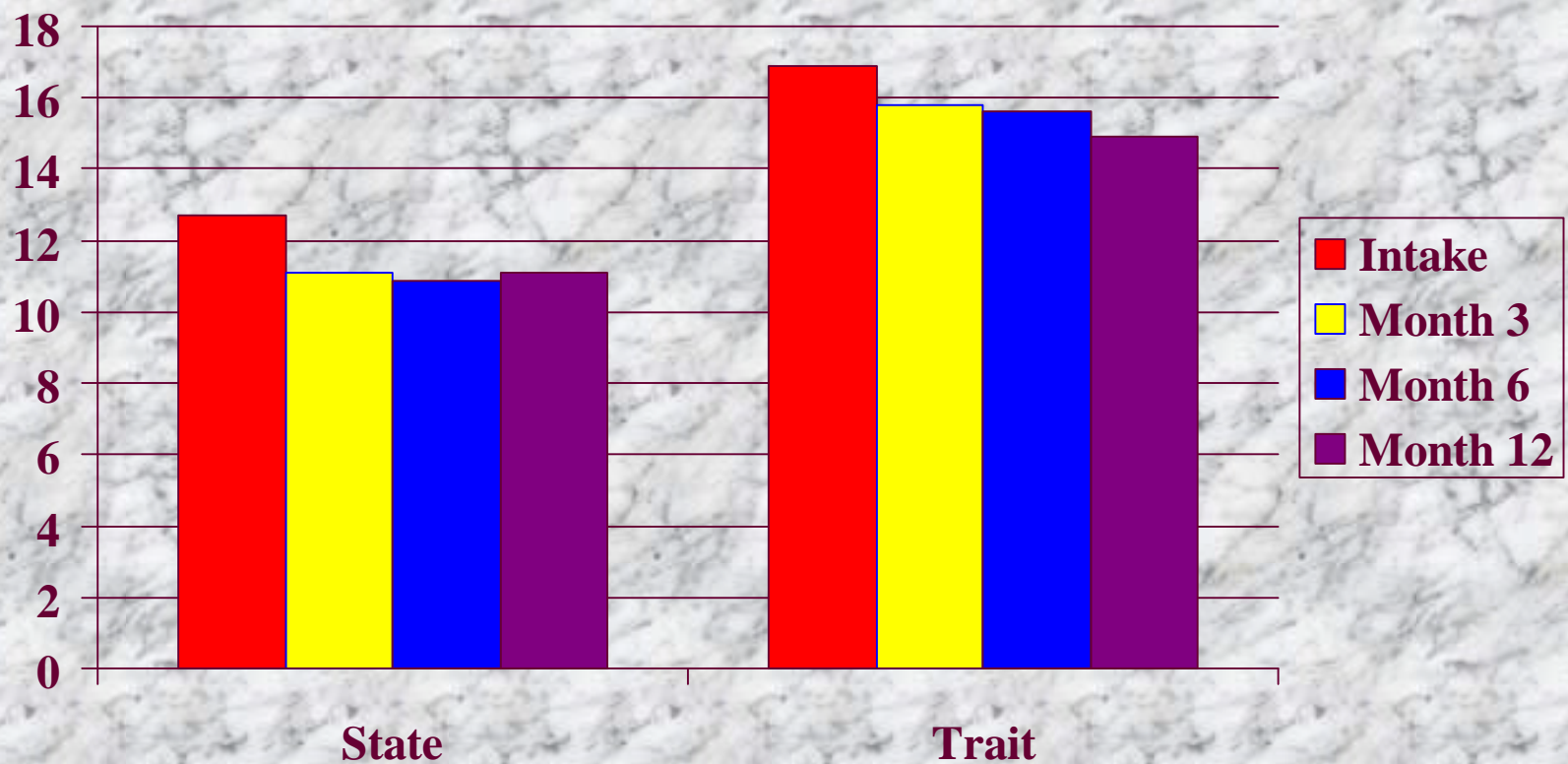
|                        | $p <$ |
|------------------------|-------|
| Depression (BDI)       | .001  |
| Anger (STAXI)          | .001  |
| Family Cohesion (FES)  | .001  |
| Family Conflict (FES)  | .001  |
| Relationship Happiness | .001  |



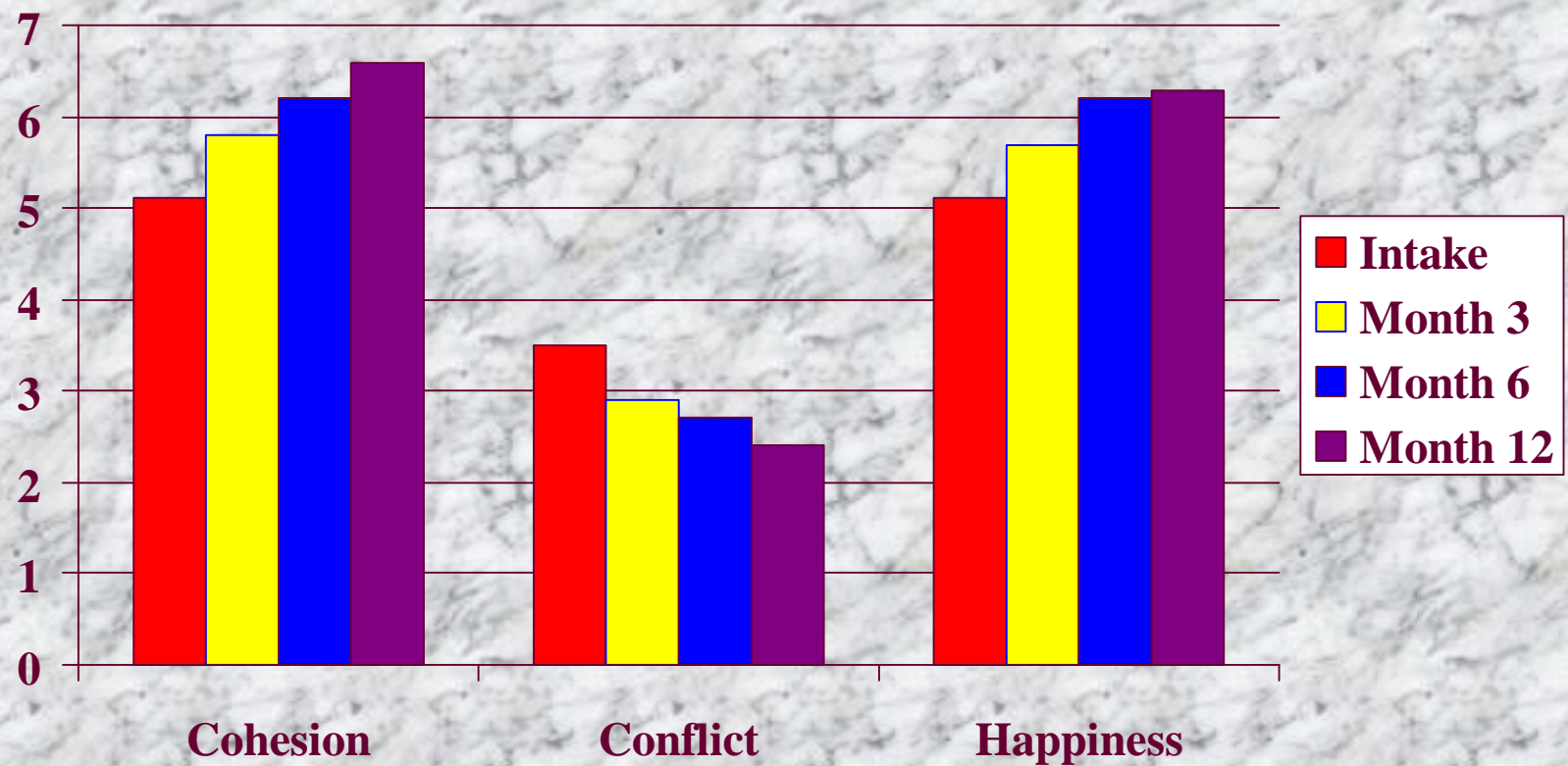
# CSO Depression Scores (Beck)



# CSO Anger Scores (STAXI)



# CSO/IP Relationship





# Conclusions

- Problem drinkers who are initially unmotivated for change can be engaged in treatment through unilateral family therapy with concerned significant others
- Parents of adult children are particularly effective, and may be an overlooked resource for engaging problem drinkers

# Conclusions

- CSO functioning improved from all three approaches
- CRAFT yielded a threefold higher rate of IP engagement in treatment
- The primary reason for failure of the Johnson Institute approach was unwillingness of the family to proceed with the confrontation